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PATENT APPLICATION FEE DETERMINATION RECORD  Substitute for Form PTO-875  Control number of a collection of information unless it displays a valid OMB control number.  Application or Docket Number of Control number.												
APPLICATION AS FILED - (Column 1)						- PART I (Column 2)		SMALL ENTITY .		OR	OTHER THAN	
FOR NUMBER FILE			ER FILED	NUM	NUMBER EXTRA		RÁTE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.18(a), (b), or (c))												
SEARCH FEE (37 CFR 1:16(x), (i), or (mi))					•						,	
EXA	MINATION FEE FR 1.18(o), (p), or				•	•				1		
TOT	AL CLAIMS FR 1.16(i)			minus 20			11	х '=		OR	X =	
IND	PENDENT CLA	IMS	minus 3 =			•		x =		1	.х =	
APP FEE	LICATION SIZE	she is t ada	If the specification and sheets of paper, the ap is \$250 (\$125 for small additional 50 sheets or 35 U.S.C. 41(a)(1)(G) a			oplication size fee due I entity) for each r fraction thereof. See		,			· •	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(j))												
* if the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		1	TOTAL	
APPLICATION AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)								SMALL (	ENTITY	OR	OR OTHER THAN	
AMENDMENTA		CLAIN REMAIN AFTE AMENDI	AS IING R		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDI- TIONAL FEE (8)		RATE (\$)	ADDI- TIONAL FEE (\$)
	Total (37 CFR 1.15(7))	:20		Minus	-26	= . ;	11	х =		OR	χ =	
	Independent (37 CFR 1.16(4))	.3		Minus	" <b>5</b>	=	1	x =		OR	Х ==	
ME	Application Size Fee (37 CFR 1.16(a))							·		]		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(II))									OR		
					•	٠.		TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column			(Column 2)	) (Column 3)				_		, v
AT B	411211	CLAIA REMAIN AFTE AMENDI	ING R		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT. EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
ME	Total (37 CFR 1.16())	20		Minus	26	1-62	1	x =		OR	X =	
MENDMENT	Independent (37 CFR 1,16(h))	:3		Minus	<del>"</del> 5	1 · O		χ =		OR	х =	7
AME.	Application Size Fee (37 CFR 1.16(s))						1			7		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37.CFR 1.18(j))						]			OR		
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  • If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  • If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  • If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".												

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